| United States Department of                                                                                                                                                                                                                                                                                                                                                                                                             | · ·                                                                                                                                              |                                         |                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|
| NRCS-WA Practice Documentation Checklist                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                  |                                         |                             |
| 311 Alley Cropping                                                                                                                                                                                                                                                                                                                                                                                                                      | Omerates ID                                                                                                                                      |                                         | Dete                        |
| Owner                                                                                                                                                                                                                                                                                                                                                                                                                                   | Operator I.D.                                                                                                                                    |                                         | Date                        |
| Operator                                                                                                                                                                                                                                                                                                                                                                                                                                | Tract                                                                                                                                            |                                         | Field (s):                  |
| Contract Number                                                                                                                                                                                                                                                                                                                                                                                                                         | Contract Item Nu                                                                                                                                 | imber (s):                              |                             |
| Field Office                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                  |                                         |                             |
| Practice objective, Identification of the extent of practi Location identification, this can be sketch in the plan drawings (legal Environmental Evaluation NRCS-W Documentation of necessary perm Site-specific practice specification  The following additional data are needed  Check Box  Crop sequence and number of strips Crop, forage or tree/shrub species so Irrigation or water requirements. Location and extent of access. | ces applied, an aerial photo, soils n description is required) /A-CPA-052, its – federal, state, trib d for the specific pra the Requirements ar | al, local - as applicant ctices listed. | ·                           |
| Maintenance plan and erosion contr                                                                                                                                                                                                                                                                                                                                                                                                      | ol needs.                                                                                                                                        |                                         |                             |
| Soils.  Wildlife group to benefit (Fish and W Guidesheets) (NRCS-WA-TN-14).                                                                                                                                                                                                                                                                                                                                                             | /ildlife Habitat Manage                                                                                                                          | ment                                    |                             |
| Additional practices [supporting practic practice. Check the requirements of this for the necessary supporting practices.                                                                                                                                                                                                                                                                                                               |                                                                                                                                                  |                                         |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                  |                                         |                             |
| Certification:                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                  |                                         |                             |
| I have completed a review of all of the                                                                                                                                                                                                                                                                                                                                                                                                 | ractico documentati                                                                                                                              | on and cortify the                      | annlied practice meets NDCS |

I have completed a review of all of the practice documentation and certify the applied practice meets NRCS specifications."

Certified by: /s/

Job Title:

May 2003